| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | John | Gari |
| | your government-issued picture identification (for | First name | First name |
| | example, your driver's | Wesley | Ann |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your | Myers | Hanlon-Myers |
| | meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | | Gari Ann Hanlon |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1321 | xxx-xx-0276 |
| | | | |

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Gari Ann Hanlon-Myers Debtor 2 Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 152 Grand Avenue Wood River, IL 62095 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Madison County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Debtor 1

John Wesley Myers

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| | otor 1 John Wesley Myer otor 2 Gari Ann Hanlon-N | | | | | Case number (if known) | | | | | |
|-----|---|----------|--------------|--|--|--|------|--|--|--|--|
| | | | | | | | | | | | |
| Par | Tell the Court About | Your Ban | kruptcy Ca | ise | | | | | | | |
| 7. | The chapter of the Bankruptcy Code you are | | | | n, see <i>Notice Required</i> and check the approp | by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptoriate box. | ;y | | | | |
| | choosing to file under | ■ Chap | Chapter 7 | | | | | | | | |
| | | ☐ Chap | ☐ Chapter 11 | | | | | | | | |
| | | ☐ Chap | ☐ Chapter 12 | | | | | | | | |
| | | ☐ Chap | oter 13 | | | | | | | | |
| | | | | | | | | | | | |
| 8. | How you will pay the fee | ab or | out how yo | ou may pay. Typically, i attorney is submitting | f you are paying the fee | heck with the clerk's office in your local court for more de e yourself, you may pay with cash, cashier's check, or mo pehalf, your attorney may pay with a credit card or check | oney | | | | |
| | | | | | | option, sign and attach the Application for Individuals to F | 'ay | | | | |
| | | | • | ee in Installments (Offici at my fee be waived (Y | , | otion only if you are filing for Chapter 7. By law, a judge n | nay, | | | | |
| | | | | | | f your income is less than 150% of the official poverty line of installments). If you choose this option, you must fill | | | | | |
| | | | | | | Official Form 103B) and file it with your petition. | | | | | |
| | | | | | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | | | | | |
| | last 8 years? | ☐ Yes. | | | | | | | | | |
| | | | District | | When | Case number | | | | | |
| | | | District | | When | Case number | | | | | |
| | | | District | | When | Case number | | | | | |
| | | | | | | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | | | | |
| | | | Debtor | | | Relationship to you | | | | | |
| | | | District | | When | Case number, if known | | | | | |
| | | | Debtor | | | Relationship to you | | | | | |
| | | | District | | When | Case number, if known | | | | | |
| 11. | Do you rent your | - | Go to I | ine 12. | | | | | | | |
| | residence? | ■ No. | | | eviction judament aga | ainst you and do you want to stay in your residence? | | | | | |
| | | ☐ Yes. | - | No. Go to line 12. | r eviction judgment aga | anst you and do you want to stay in your residence? | | | | | |
| | | | | | tement Δhout an Evicti | ion Judgment Against You (Form 101A) and file it with thi | S | | | | |
| | | | Ц | bankruptcy petition. | iomeni Aboul an Evicil | on vacyment Against Toa (Folin ToTA) and the It with the | J | | | | |
| | | | | | | | | | | | |

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| | otor 1 John Wesley Mye otor 2 Gari Ann Hanlon- | | | Case number (if known) | | | | | |
|--|--|---|---|---|--|--|--|--|--|
| | | _ | | | | | | | |
| Par | Report About Any Bu | ısinesses | You Own as a Sole Propriet | or | | | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | | | |
| | | ☐ Yes. | Name and location of business | | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | | | |
| partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach | | | Number, Street, City, Stat | e & ZIP Code | | | | | |
| | it to this petition. | | Check the appropriate bo | x to describe your business: | | | | | |
| | | | ☐ Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | | | | |
| | | | ☐ Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | | | |
| | | | ☐ Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | | | | |
| | | | ☐ Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | | | | |
| | | | ☐ None of the above | | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B). | | | | | | | |
|) (| For a definition of small | ■ No. | I am not filing under Chap | ter 11. | | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter Code. | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | | | |
| | | ☐ Yes. | I am filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| Par | rt 4: Report if You Own or | Have An | v Hazardous Property or An | y Property That Needs Immediate Attention | | | | | |
| | Do you own or have any | ■ No. | , | , | | | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | | | | | |
| | of imminent and identifiable hazard to public health or safety? | L 103. | What is the hazard? | | | | | | |
| | Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | | | | | | |
| | - | | | Number, Street, City, State & Zip Code | | | | | |
| | | | | | | | | | |

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| Debtor 1 | John Wesley Myers | |
|----------|-----------------------|------------------------|
| Debtor 2 | Gari Ann Hanlon-Myers | Case number (if known) |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb Deb | tor 1 John Wesley Mye l tor 2 Gari Ann Hanlon-I | | | Case n | number (if known) | | | | | | |
|---------------------------|--|--|--|---|---|--|--|--|--|--|--|
| Part | 6: Answer These Questi | ions for Re | porting Purposes | | | | | | | | |
| 16. | What kind of debts do you have? | | individual primarily for a personal, family, or household purpose." | | | | | | | | |
| | | | □ No. Go to line 16b. | | | | | | | | |
| | | 16b. | Yes. Go to line 17. | Are your debts primarily business debts? Business debts are debts that you incurred to obtain | | | | | | | |
| | | 100. | money for a business or investment or through the operation of the business or investment. | | | | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | | | | |
| | | 16c. | State the type of debts you owe that | at are not consumer debts or bu | usiness debts | | | | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. Go | to line 18. | | | | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do you are paid that funds will be available | | t property is excluded and administrative expenses ditors? | | | | | | |
| | administrative expenses are paid that funds will | | ■ No | | | | | | | | |
| | be available for distribution to unsecured creditors? | | □Yes | | | | | | | | |
| 18. How many Creditors do | | 1 -49 | | <u> </u> | 25 ,001-50,000 | | | | | | |
| | you estimate that you owe? | ☐ 50-99 | | ☐ 5001-10,000 ☐ 10,001-25,000 | ☐ 50,001-100,000 ☐ More than100,000 | | | | | | |
| | | ☐ 100-19 ☐ 200-99 | | 10,001-20,000 | I Note than 100,000 | | | | | | |
| 19. | How much do you | □ \$0 - \$5 | 50,000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | | | | | |
| | estimate your assets to be worth? | | 1 - \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | | | | | | |
| | | | 101 - \$500,000 101 - \$1 million | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | | | | | | | |
| 20. | How much do you | □ \$0 - \$5 | 50,000 | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | | | | | |
| | estimate your liabilities to be? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | \$1,000,000,001 - \$10 billion | | | | | | |
| | | | 01 - \$500,000 01 - \$1 million | □ \$100,000,001 - \$100 million | | | | | | | |
| Part | 7: Sign Below | | | | | | | | | | |
| For | you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. | | | | | | | | | |
| | | | | | igible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7. | | | | | | |
| | | | ney represents me and I did not pa , I have obtained and read the notic | | o is not an attorney to help me fill out this (b). | | | | | | |
| | | I request i | relief in accordance with the chapte | r of title 11, United States Code | e, specified in this petition. | | | | | | |
| | | I understa bankrupto and 3571. | y case can result in fines up to \$25 | ealing property, or obtaining mo 0,000, or imprisonment for up to | oney or property by fraud in connection with a o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | | | | |
| | | | Wesley Myers esley Myers | | n Hanlon-Myers anlon-Myers | | | | | | |
| | | | of Debtor 1 | Signature of I | | | | | | | |
| | | Executed | on August 31, 2016 | Executed on | August 31, 2016 | | | | | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | | | | | | |

| Debtor 1 John Wesley Mye Gari Ann Hanlon- | | Cas | Case number (if known) | | | | |
|---|---|------------------------------------|---|--|--|--|--|
| | | | | | | | |
| For your attorney, if you are represented by one | under Chapter 7, 11, 12, or 13 of title 11, | United States Code, and have e | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) | | | | |
| If you are not represented by an attorney, you do not need to file this page. | | olies, certify that I have no know | vledge after an inquiry that the information in the | | | | |
| | /s/ David A. Virgin | Date | August 31, 2016 | | | | |
| | Signature of Attorney for Debtor | | MM / DD / YYYY | | | | |
| | David A. Virgin | | | | | | |
| | Printed name | | | | | | |
| | David A. Virgin | | | | | | |
| | Firm name | | | | | | |
| | 24 North Lincoln | | | | | | |
| | Cottage Hills, IL 62018 | | | | | | |
| | Number, Street, City, State & ZIP Code | | | | | | |
| | Contact phone 618-258-0070 | Email address | davidvirgin@att.net | | | | |
| | 03124996 | | | | | | |
| | Bar number & State | | | | | | |

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| Fill | n this information to identify your case: | | |
|---------------|---|-------------|-------------------------------|
| Del | tor 1 John Wesley Myers | | |
| Dol | First Name Middle Name Last Name tor 2 Gari Ann Hanlon-Myers | | |
| | tor 2 Gari Ann Hanlon-Myers se if, filing) First Name Middle Name Last Name | | |
| Uni | ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF ILLINOIS | | |
| Cas (if kr | e number | _ | k if this is an ded filing |
| | | | |
| | icial Form 106Sum | | |
| | mmary of Your Assets and Liabilities and Certain Statistical Information | | 12/15 |
| info | s complete and accurate as possible. If two married people are filing together, both are equally responsible for mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendoriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | | |
| Par | 1: Summarize Your Assets | | |
| | | Your a | essets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 95,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 50,788.14 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 145,788.14 |
| Par | 2: Summarize Your Liabilities | | |
| | | Your I | iabilities |
| | | Amour | nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 110,751.50 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 46,565.22 |
| | Your total liabilities | \$ | 157,316.72 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) | | |
| ٠. | Copy your combined monthly income from line 12 of Schedule I | \$ | 2,480.85 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,089.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | ■ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal | , family, or |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this | box and s | submit this form to |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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| Debto | Gari Ann Hanlon-Myers | Case number (if known) | |
|-------|---|------------------------|----------------|
| | From the Statement of Your Current Monthly Income: Co 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 | | \$ 3,236.76 |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 John Wesley Myers

| | Total clair | m |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | Cas | 6 10-31343 | -ikg | DUC 1 | 1 1160 00/31 | /10 F | age 10 | 01 33 | | |
|---|---|--|-------------------------|---|---|---------------------------------------|--------------|---|---|--------------|
| Fill in this inform | ation to identify | your case and th | nis filin | g: | | | | | | |
| Debtor 1 | John Wesley | / Myers | | | | | | | | |
| 5 1 5 | First Name | Middle | e Name | | Last Name | | | | | |
| Debtor 2 (Spouse, if filing) | Gari Ann Ha First Name | | e Name | | Last Name | | | | | |
| United States Ban | kruptcy Court for | the: SOUTHER | N DIST | RICT OF ILI | LINOIS | | | | | |
| Case number | | | | | | | | | ☐ Check if this amended filir | |
| Official For Schedule | | - | | | | | | | 12/ | /15 |
| think it fits best. Be information. If more Answer every questi | as complete and a space is needed, son. ach Residence, Brave any legal or equal. | accurate as possibl attach a separate sl uilding, Land, or Otl | le. If two heet to t | o married peo this form. On al Estate You | If an asset fits in mo ple are filing togethe the top of any additi Own or Have an Inter ng, land, or similar p | er, both are onal pages rest In | equally resp | onsible for su | pplying correct | • |
| 1.1 152 Grand Street address, if | Avenue available, or other des | cription | Wha | Single-fami Duplex or n | erty? Check all that apply ily home nulti-unit building um or cooperative | , | the amount | of any secured | ims or exemptions. P d claims on <i>Schedule</i> ns Secured by Propel | e D: |
| Wasal Dive | | C200E 0000 | | <u> </u> | red or mobile home | | Current va | | Current value of the | |
| City | State | ZIP Code | Who | Investment Timeshare Other | est in the property? | Check one | Describe t | he nature of your simple, tense), if known. | portion you own? \$95,000 our ownership intereducy by the entiretie | 0.00 rest |
| Madison | | | | Debtor 2 or | nly | | | | | |
| County | | | | At least one er information | nd Debtor 2 only e of the debtors and ar n you wish to add aboation number: | | (see in | structions) | munity property | |
| | | | | | ick, 3 bedrooms 50x62 sq. ft. | , 2 bathro | ooms, | | | |
| | ve attached for | | | | s from Part 1, incl | | | => | \$95,000.0 | 00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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| Debtor Debtor | | ohn Wesley ari Ann Ha | y Myers Inlon-Myers | | Case number (if known) | | |
|---------------------|-----------------------|--------------------------|--|--|--|--|--|
| 3. Cars | s, vans, | trucks, trac | tors, sport utility ve | hicles, motorcycles | | | |
| □ No | n | | | | | | |
| ■ Ye | | | | | | | |
| | Make: | Ford | | Who has an interest in the property? Check one | | cured claims or exemptions. Put y secured claims on Schedule D: | |
| ı | Model: | F150 | | ■ Debtor 1 only | | ave Claims Secured by Property. | |
| | Year: | 2012 | | Debtor 2 only | Current value of t | | |
| | | ate mileage: | 51,000 | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | Otner into | ormation: | | At least one of the debtors and another | | | |
| | | | | ☐ Check if this is community property (see instructions) | \$21,000 | 9.00 \$21,000.00 | |
| | Make: | Hyundai Sonato | | Who has an interest in the property? Check one | the amount of any | cured claims or exemptions. Put y secured claims on Schedule D: | |
| | Model: | 2007 | | Debtor 1 only | | Have Claims Secured by Property. | |
| | Year: Approxim | ate mileage: | 155,000 | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Current value of t entire property? | | |
| | | ormation: | 100,000 | ☐ At least one of the debtors and another | ontillo proporty. | portion you own. | |
| | | | | | | | |
| | | | | Check if this is community property (see instructions) | \$3,000 | 0.00 \$3,000.00 | |
| | I the do | | | n for all of your entries from Part 2, including | | \$24,000.00 | |
| Part 3: | Describ | e Your Perso | onal and Household Ite | ems | | | |
| Do yoι | ı own o | r have any l | egal or equitable in | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. | |
| <i>Exa</i> . □ N | <i>mples:</i> I lo | Major appliar | f urnishings nces, furniture, linens | , china, kitchenware | | | |
| ■ Y | es. De | scribe | | | | | |
| | | | Living room, be | droom, kitchen | | \$2,000.0 | |
| Exa | , lo | | | eo, stereo, and digital equipment; computers, pr nedia players, games | inters, scanners; music co | collections; electronic devices | |
| | | | 2 toloviciono | | | \$500.0 | |
| | | | 3 televisions | | | | |
| | | | | | | | |

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

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| | ebtor 1 ebtor 2 | John Wesley Gari Ann Ha | | Case number (if known) | |
|-----|------------------------|--|--|--|--|
| | ☐ Yes. | Describe | | | |
| 9. | Exampl ■ No | les: Sports, photo musical instru Describe | ographic, exercise, and other hobby equipment; bicycles, pool table | s, golf clubs, skis; canoes and kayaks | ; carpentry tools; |
| 10 | ■ No | | s, shotguns, ammunition, and related equipment | | |
| 11. | □ No | | othes, furs, leather coats, designer wear, shoes, accessories | | |
| | | | Clothes | | \$100.00 |
| | | | Clothes | | \$100.00 |
| 12. | □ No | | welry, costume jewelry, engagement rings, wedding rings, heirloon | n jewelry, watches, gems, gold, silver | |
| | | | Jewelry | | \$50.00 |
| | | | Jewelry | | \$100.00 |
| 13. | Exam _p □ No | orm animals oles: Dogs, cats, Describe | birds, horses | | |
| | — 163. | Describe | 2 dama | | \$0.00 |
| 14 | ■ No | ther personal an | 2 dogs d household items you did not already list, including any heal formation | th aids you did not list | ψ0.00 |
| 15 | | | of all of your entries from Part 3, including any entries for pag number here | es you have attached | \$2,850.00 |
| | | scribe Your Finan | | 0 | |
| D | o you ow | wn or nave any l | egal or equitable interest in any of the following? | porti e Do no | ent value of the on you own? ot deduct secured s or exemptions. |
| 16 | ☐ No | | have in your wallet, in your home, in a safe deposit box, and on ha | nd when you file your petition | |

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| | btor 1 btor 2 | John Wesle Gari Ann Ha | | /ers | Case number (if known) | |
|---|------------------|--------------------------------------|-------------|--|---|-------------------------|
| | | | | | Cash | \$30.00 |
| | | | | | Cash | \$20.00 |
| _ | | 0. | • | | ounts; certificates of deposit; shares in credit unions, brokerage houses s with the same institution, list each. | s, and other similar |
| ı | Yes | | | | Institution name: | |
| | | | 17.1. | Checking | GCS Federal Credit Union | \$30.00 |
| | | | 17.2. | Savings | GCS Federal Credit Union | \$5.00 |
| | | | 17.3. | Checking | Wells Fargo Preferred Checking | \$25.00 |
| ļ | Examp ■ No | les: Bond funds | | ely traded stocks ent accounts with bro | okerage firms, money market accounts | |
| | | | tock and | | orated and unincorporated businesses, including an interest in ar | ո LLC, partnership, and |
| | No | | | about them me of entity: | % of ownership: | |
| _ | Negotia | able instruments | s include p | personal checks, cas | otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them. | |
| _ | _ | Give specific inf | | about them uer name: | | |
| _ | | nent or pensior les: Interests in | | | 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| ı | Yes. I | _ist each accou | | ely. of account: | Institution name: | |
| | | | 401(l | () | U.S. Steel Corp. | \$23,828.14 |
| | Your sh | | ed deposi | s you have made so | o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or | r others |
| | | | | | Institution name or individual: | |
| _ | Annuiti ■ No | es (A contract for | or a perio | dic payment of mon | ey to you, either for life or for a number of years) | |
| _ | ■ No □ Yes | ls | suer nam | e and description. | | |
| | | s in an educati C. §§ 530(b)(1), | | | qualified ABLE program, or under a qualified state tuition program | |

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| | ebtor 1 ebtor 2 | | sley Myers Hanlon-Myers | | Case number | (if known) |
|-----|----------------------|----------------------------|--|-------------------------|------------------------------------|---|
| | ☐ Yes | | Institution name and description. | Separately file the rec | ords of any interests.11 U.S.C | . § 521(c): |
| 25 | ■ No | | r future interests in property (other | er than anything list | ed in line 1), and rights or po | owers exercisable for your benefit |
| 26 | Patents | s, copyrights | s, trademarks, trade secrets, and domain names, websites, proceeds | | | |
| | ☐ Yes. | Give specific | information about them | | | |
| 27. | | | es, and other general intangibles permits, exclusive licenses, cooper | ative association hold | lings, liquor licenses, professio | onal licenses |
| | ☐ Yes. | Give specific | information about them | | | |
| M | oney or _l | property ow | ed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28 | Tax ref ■ No | funds owed | o you | | | |
| | _ | Give specific | information about them, including v | vhether you already fi | led the returns and the tax yea | |
| 29 | Examp ■ No | | or lump sum alimony, spousal sup | port, child support, m | aintenance, divorce settlement | t, property settlement |
| 30. | Examp ■ No | oles: Unpaid v benefits | neone owes you vages, disability insurance payment unpaid loans you made to someon | | sick pay, vacation pay, worke | rs' compensation, Social Security |
| 24 | | Give specific | information | | | |
| 31. | | | lisability, or life insurance; health sa | avings account (HSA) | ; credit, homeowner's, or rente | r's insurance |
| | _ | Name the ins | urance company of each policy and Company name: | d list its value. | Beneficiary: | Surrender or refund value: |
| 32 | If you a | | perty that is due you from someo ciary of a living trust, expect procee | | ice policy, or are currently entit | eled to receive property because |
| | _ | Give specific | information | | | |
| 33. | | | d parties, whether or not you hav s, employment disputes, insurance | | | |
| | | Describe ea | ch claim | | | |
| 34. | ■ No | _ | nd unliquidated claims of every n | ature, including cou | interclaims of the debtor and | l rights to set off claims |
| 35 | | | s you did not already list | | | |
| | ■ No | | information | | | |

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| Deb Deb | tor 1 tor 2 | John Wesley Myers Gari Ann Hanlon-Myers | | Case number (if known) | |
|--------------|----------------|--|----------------------------|------------------------------|--------------|
| 36. | | ne dollar value of all of your entries from Part 4, includin rt 4. Write that number here | | | \$23,938.14 |
| Part | 5: Des | scribe Any Business-Related Property You Own or Have an Inter | est In. List any real esta | ate in Part 1. | |
| _ | | wn or have any legal or equitable interest in any business-relate | ed property? | | |
| _ | | to Part 6. | | | |
| Ц | Yes. G | o to line 38. | | | |
| Part | | scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | st In. | |
| 46. [| Do you | own or have any legal or equitable interest in any farm- | or commercial fishir | ng-related property? | |
| | No. | Go to Part 7. | | | |
| | ☐ Yes. | Go to line 47. | | | |
| Part | 7: | Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| | | have other property of any kind you did not already list? les: Season tickets, country club membership | ? | | |
| | Examp I No | es. Season tickets, country club membership | | | |
| | | Give specific information | | | |
| 54. | Add t | ne dollar value of all of your entries from Part 7. Write th | at number here | | \$0.00 |
| Part | 8: | List the Totals of Each Part of this Form | | | |
| 55. | Part 1 | : Total real estate, line 2 | | | \$95,000.00 |
| 56. | Part 2 | : Total vehicles, line 5 | \$24,000.00 | _ | |
| 57. | Part 3 | : Total personal and household items, line 15 | \$2,850.00 | | |
| 58. | Part 4 | : Total financial assets, line 36 | \$23,938.14 | | |
| 59. | Part 5 | : Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6 | : Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7 | : Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total | personal property. Add lines 56 through 61 | \$50,788.14 | Copy personal property total | \$50,788.14 |
| 63. | Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$145,788.14 |

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| Fill in | this information to identify your case: | | | • | 1 |
|------------------------------------|--|--|-------------------------|---|---|
| Debtor | | | | | |
| Debioi | John Wesley Myers First Name | Middle Name | L | ast Name | |
| Debtor (Spouse | | Middle Name | | _ast Name | |
| | · • | | | | |
| United | States Bankruptcy Court for the: SOU | THERN DISTRICT OF | ILLIN | OIS | |
| Case r | number n) | | | | ☐ Check if this is an amended filing |
| Offic | cial Form 106C | | | | |
| | nedule C: The Prope | rty You Cla | im | as Exempt | 4/16 |
| the prop needed | complete and accurate as possible. If two reperty you listed on Schedule A/B: Property I, fill out and attach to this page as many cumber (if known). | (Official Form 106A/B) | as yo | our source, list the property that you | claim as exempt. If more space is |
| specificany app funds- exemp | ch item of property you claim as exemp c dollar amount as exempt. Alternativel plicable statutory limit. Some exemptio —may be unlimited in dollar amount. Ho tion to a particular dollar amount and the applicable statutory amount. | ly, you may claim the f ns—such as those for owever, if you claim an | ull fai heal exen | ir market value of the property bei th aids, rights to receive certain b nption of 100% of fair market valu | ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the |
| Part 1 | Identify the Property You Claim as | Exempt | | | |
| 1. W l | hich set of exemptions are you claiming | g? Check one only, eve | n if yo | our spouse is filing with you. | |
| | You are claiming state and federal nonba | nkruptcy exemptions. | 11 U. | S.C. § 522(b)(3) | |
| | You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | |
| 2. Fo | or any property you list on Schedule A/E | 3 that you claim as exe | empt, | fill in the information below. | |
| | Brief description of the property and line on Current value of the Amount of the exemption you claim Schedule A/B that lists this property portion you own | | | Specific laws that allow exemption | |
| 30. | nedule A/D that hats this property | portion you own Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Debto | or 1 Exemptions | | | | |
| | 2 Grand Avenue Wood River, IL 2095 Madison County | \$95,000.00 | | \$15,000.00 | 735 ILCS 5/12-901 |
| Or ba 21 | ne story, brick, 3 bedrooms, 2 athrooms, 00 sq. ft., 150x62 sq. ft. ne from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | ie irom <i>Genedale A/D</i> . ••• | | | | |
| | 12 Ford F150 51,000 miles ne from Schedule A/B: 3.1 | \$21,000.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | ving room, bedroom, kitchen | \$2,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Lin | ne from <i>Schedule A/B</i> : 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | televisions | \$500.00 | | \$250.00 | 735 ILCS 5/12-1001(b) |
| Lin | ne from <i>Schedule A/B</i> : 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--|---|---|----------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | Clothes Line from Schedule A/B: 11.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(a) |
| | Elle II of III of II of | | | 100% of fair market value, up to any applicable statutory limit | |
| | Jewelry Line from Schedule A/B: 12.1 | \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) |
| | Enternesin estricate for En | | | 100% of fair market value, up to any applicable statutory limit | |
| | Cash Line from Schedule A/B: 16.1 | \$30.00 | | \$30.00 | 735 ILCS 5/12-1001(b) |
| | Ellie Holli Genedale AVB. 1911 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: GCS Federal Credit Union Line from Schedule A/B: 17.1 | \$30.00 | | \$15.00 | 735 ILCS 5/12-1001(b) |
| | Ellie Holli Genedale AVB. TTT | | | 100% of fair market value, up to any applicable statutory limit | |
| | Savings: GCS Federal Credit Union Line from Schedule A/B: 17.2 | \$5.00 | | \$2.50 | 735 ILCS 5/12-1001(b) |
| | Ellio Ilom osinodalo il Di Tria | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: Wells Fargo Preferred Checking | \$25.00 | | \$25.00 | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A/B: 17.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 401(k): U.S. Steel Corp. Line from Schedule A/B: 21.1 | \$23,828.14 | | \$23,828.14 | 735 ILCS 5/12-1006 |
| | Zine nem esinedate i vi Zi Zini | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every | | | led on or after the date of adjustme | nt.) |
| | ■ No□ Yes. Did you acquire the property covered | ad by the exemption wi | thin 1 | 215 days hefere you filed this case | 2 |
| | No | sa by the exemption wi | u IIII I | ,210 days before you filed this case | · f |
| | ☐ Yes | | | | |

| | | | | | | _ | | | | |
|---|--|--|--|-------------------------------------|--|--|--|--|--|--|
| Fi | II in this informa | tion to identify your o | ase: | | | | | | | |
| De | ebtor 1 | First Name | Medalla Nassa | | and Names | | | | | |
| De | ebtor 2 | First Name Gari Ann Hanlon-I | Middle Name | L | ast Name | | | | | |
| | oouse if, filing) | First Name | Middle Name | L | ast Name | | | | | |
| Uı | nited States Bank | cruptcy Court for the: | SOUTHERN DISTRICT OF | ILLIN | OIS | | | | | |
| Ca | ase number | | | | | | | | | |
| (if | known) | | | | | ☐ Check if this is an amended filing | | | | |
| 0 | fficial Fori | m 106C | | | | | | | | |
| S | chedule | C: The Pro | perty You Cla | im | as Exempt | 4/16 | | | | |
| the nec cas Fo sp e | property you list eded, fill out and se number (if kno r each item of pi ecific dollar amo | ed on Schedule A/B: Plattach to this page as n wn). roperty you claim as e bunt as exempt. Alterr | roperty (Official Form 106A/B) nany copies of Part 2: Addition exempt, you must specify the natively, you may claim the f | as yo nal Pa e amo ull fai | our source, list the property that you age as necessary. On the top of any bunt of the exemption you claim. ir market value of the property be | additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of | | | | |
| fur exe to | nds—may be un emption to a par the applicable s | limited in dollar amou ticular dollar amount tatutory amount. | nt. However, if you claim an and the value of the propert | exen | nption of 100% of fair market valu | enefits, and tax-exempt retirement le under a law that limits the t, your exemption would be limited | | | | |
| | | the Property You Clai | - | | | | | | | |
| 1. | Which set of e | xemptions are you cla | aiming? Check one only, eve | n if yo | our spouse is filing with you. | | | | | |
| | You are clai | ming state and federal | nonbankruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | | | | |
| | ☐ You are clai | ming federal exemption | s. 11 U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any prope | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | | of the property and line | Specific laws that allow exemption | | | | | | | |
| | Schedule A/B th | at lists this property | portion you own Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | | | |
| D | ebtor 2 Exemp | | | | | | | | | |
| | _ | bedroom, kitchen | \$2,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) | | | | |
| | Line from Sche | aule A/B: 6. 1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 3 televisions | | \$500.00 | | \$250.00 | 735 ILCS 5/12-1001(b) | | | | |
| | Line from Sche | dule A/B: 7.1 | | | 100% of fair market value, up to | | | | | |
| | | | | | any applicable statutory limit | | | | | |
| | Clothes | | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(a) | | | | |
| | Line from Sche | dule A/B: 11.2 | <u> </u> | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Jewelry | | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) | | | | |
| | Line from Sche | dule A/B: 12.2 | | _ | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Cash | | \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) | | | | |
| | Line from Scho | dula 1/D: 16 2 | | _ | | | | | | |

Official Form 106C

☐ 100% of fair market value, up to any applicable statutory limit

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| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|----|---|--------------------------------------|--|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | Checking: GCS Federal Credit Union Line from Schedule A/B: 17.1 | \$30.00 | \$30.00 \$15.00 100% of fair market value, up to any applicable statutory limit | | 735 ILCS 5/12-1001(b) |
| | Zine nem concaule / v.z. | | | | |
| | Savings: GCS Federal Credit Union Line from Schedule A/B: 17.2 | \$5.00 | | \$2.50 | 735 ILCS 5/12-1001(b) |
| | Line Iron Schedule A.B. 1112 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 | | | led on or after the date of adjustme | nt.) |
| | No | | | | |
| | Yes. Did you acquire the property covere | d by the exemption wi | thin 1 | ,215 days before you filed this case | ? |
| | □ No | | | | |
| | ☐ Yes | | | | |

| Fill in this information to identi | fy your case: | | | |
|---|---|-----------------------|-------------------------|---------------|
| Debtor 1 John Wesl | ev Myers | | | |
| First Name | Middle Name Last Name | | - | |
| Debtor 2 Gari Ann H | lanion-Myers | | | |
| (Spouse if, filing) First Name | Middle Name Last Name | | - | |
| United States Bankruptcy Court for | or the: SOUTHERN DISTRICT OF ILLINOIS | | _ | |
| Case number | | | | |
| (if known) | | | ☐ Check | if this is an |
| | | | amend | ded filing |
| O# : 1 F 400D | | | | |
| Official Form 106D | | | | |
| Schedule D: Credit | tors Who Have Claims Secure | ed by Propert | y | 12/15 |
| | ssible. If two married people are filing together, both are e , fill it out, number the entries, and attach it to this form. (| | | |
| 1. Do any creditors have claims secu | ured by your property? | | | |
| \square No. Check this box and su | abmit this form to the court with your other schedules. ' | You have nothing else | to report on this form. | |
| Yes. Fill in all of the inform | nation below. | | | |
| Part 1: List All Secured Clair | | | | |
| | | , Column A | Column B | Column C |
| | or has more than one secured claim, list the creditor separate itor has a particular claim, list the other creditors in Part 2. As | | Value of collateral | Unsecured |
| much as possible, list the claims in alp | phabetical order according to the creditor's name. | Do not deduct the | that supports this | portion |
| GCS Federal Credit | | value of collateral. | claim | If any |
| Union | Describe the property that secures the claim: | \$21,608.00 | \$21,000.00 | \$608.00 |
| Creditor's Name | 2012 Ford F150 51,000 miles | | | |
| | | | | |
| 2070 Manusilla Baad | As of the date you file, the claim is: Check all that | | | |
| 3970 Maryville Road Granite City, IL 62040 | apply. | | | |
| Number, Street, City, State & Zip Coo | ☐ Contingent de ☐ Unliquidated | | | |
| Number, Street, City, State & Zip Cot | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or so | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and and | other | | | |
| ☐ Check if this claim relates to a | Other (including a right to offset) | | | |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number XXXX | | | |
| | | | | |
| Scott Air Force Base | Book the discount of the control of the | \$3,712.00 | \$3,000.00 | \$712.00 |
| Credit Union Creditor's Name | Describe the property that secures the claim: | Ψ3,7 12.00 | Ψ3,000.00 | Ψ/12.00 |
| Oreditor 3 Name | 2007 Hyundai Sonato 155,000 miles | | | |
| W.Winters & J Streets | | | | |
| Scott Air Force Base, II | As of the date you file, the claim is: Check all that apply. | | | |
| 62225 | Contingent | | | |
| Number, Street, City, State & Zip Coo | | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or see | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and and | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |

Official Form 106D

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| Debtor 1 | John Wesley My | ers | | Cas | se number (if know) | | |
|-------------------|--|-------------------------|--|---------------|---------------------|-------------|--------|
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Gari Ann Hanlor | n-Myers | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Date debt | was incurred | | Last 4 digits of account number | xxxx | | | |
| 2.3 We | ells Fargo | Describ | pe the property that secures the c | aim: | \$85,431.50 | \$95,000.00 | \$0.00 |
| Cred | litor's Name | 62095 One s bathr | irand Avenue Wood River, Madison County story, brick, 3 bedrooms, 2 ooms, | IL | | | |
| Des | D. Box 14411 s Moines, IA 306-3411 | | sq. ft., 150x62 sq. ft. ne date you file, the claim is: Check tingent | all that | | | |
| | ber, Street, City, State & Zip | ☐ Disp | | | | | |
| Who owe | es the debt? Check on | e. Nature | of lien. Check all that apply. | | | | |
| ■ Debtor □ Debtor | • | | agreement you made (such as mortg loan) | age or secure | d | | |
| | 1 and Debtor 2 only | ☐ Stat | utory lien (such as tax lien, mechani | c's lien) | | | |
| | t one of the debtors and | _ | gment lien from a lawsuit | , | | | |
| | if this claim relates to nunity debt | | er (including a right to offset) | | | | |
| Date debt | was incurred | | Last 4 digits of account number | 6917 | | | |
| | | | | | | | |
| | | | on this page. Write that number h | ere: | \$110,751.5 | 0 | |
| | the last page of your at number here: | form, add the dolla | r value totals from all pages. | | \$110,751.5 | 0 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | Case 1 | 0-31343-ikg | DUCI | i ileu ook | 31/10 | raye 22 | 01 33 | |
|---|--|---|--------------------|-----------------------|----------------|--------------------|-------------------|---------------------------|
| Fill in this in | nformation to identify your | case: | | | | | | |
| Debtor 1 | John Wesley My | ore | | | | | | |
| DODIOI I | First Name | Middle Name | | Last Name | | | | |
| Debtor 2 | Gari Ann Hanlon | -Myers | | | | | | |
| (Spouse if, filing | First Name | Middle Name | | Last Name | | | | |
| United State | s Bankruptcy Court for the: | SOUTHERN DIS | TRICT OF IL | LINOIS | | | | |
| Case numbe | er | | | | | | | |
| (if known) | | | | | | | | Check if this is an |
| | | | | | | | а | mended filing |
| Official F | orm 106E/F | | | | | | | |
| | e E/F: Creditors V | Vho Have Un | secured | Claims | | | | 12/15 |
| | te and accurate as possible. U | | | | art 2 for cred | litors with NO | NPRIORITY clai | |
| Schedule D: C left. Attach the name and cas | executory Contracts and Unex treditors Who Have Claims Se e Continuation Page to this pa e number (if known). | cured by Property. If ge. If you have no inf | more space is | needed, copy th | ne Part you r | need, fill it out, | number the en | tries in the boxes on the |
| | ist All of Your PRIORITY U | | | | | | | |
| | reditors have priority unsecur | ed claims against you | J? | | | | | |
| ■ No. G | o to Part 2. | | | | | | | |
| ☐ Yes. | | | | | | | | |
| Part 2: | ist All of Your NONPRIORI | TY Unsecured Clai | ms | | | | | |
| 3. Do any c | reditors have nonpriority unse | ecured claims agains | t you? | | | | | |
| ☐ No. Yo | ou have nothing to report in this | part. Submit this form t | o the court with | your other sched | dules. | | | |
| Yes. | | | | | | | | |
| unsecure | f your nonpriority unsecured of d claim, list the creditor separate creditor holds a particular claim, | ly for each claim. For e | each claim listed | d, identify what type | pe of claim it | is. Do not list o | laims already inc | cluded in Part 1. If more |
| | | | | | | | | Total claim |
| 4.1 Aff | ordable Dentistry | Last | 4 digits of acc | count number | | | | \$242.00 |
| | priority Creditor's Name | | | | | | | |
| | North Center Street at Alton, IL 62024 | wne | n was the deb | t incurred? | | | | - |
| | ber Street City State Zlp Code | As o | f the date you | file, the claim is | : Check all th | nat apply | | |
| Who | incurred the debt? Check one | | - | | | | | |
| | ebtor 1 only | | Contingent | | | | | |
| | ebtor 2 only | | Jnliquidated | | | | | |
| | ebtor 1 and Debtor 2 only | | Disputed | | | | | |
| | t least one of the debtors and ar | _ | • | RITY unsecured | claim: | | | |
| | heck if this claim is for a com | | Student loans | | | | | |
| debt | | | | ng out of a separa | ation agreem | ent or divorce t | hat you did not | |
| | e claim subject to offset? | | rt as priority cla | | | | | |
| | lo | | Debts to pension | n or profit-sharing | plans, and c | ther similar del | ots | |
| ΠY | es | | Other. Specify | | | | | |

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| | or 1 John Wesley Myers or 2 Gari Ann Hanlon-Myers | Case number (if know) | |
|-----|--|---|------------|
| 4.2 | Barclays Bank, Delaware | Last 4 digits of account number XXXX | \$7,765.00 |
| | Nonpriority Creditor's Name P.O. Box 8803 Wilmington, DE 19899-8803 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | | |
| | Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.3 | Calloway County Sheriff's Office Nonpriority Creditor's Name | Last 4 digits of account number 6380 | \$10.22 |
| | 701 Olive Street Murray, KY 42071 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| | | | |
| 4.4 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number XXXX | \$3,635.00 |
| | P.O. Box 30253 Salt Lake City, UT 84130-0253 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | | |
| | □ 169 | Other. Specify Menards | |

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| | John Wesley Myers Gari Ann Hanlon-Myers | Case number (if know) | |
|----------|--|---|-------------|
| | Capital One | Last 4 digits of account number XXXX | \$4,088.00 |
| F | Nonpriority Creditor's Name P.O. Box 30253 Salt Lake City, UT 84130-0253 | When was the debt incurred? | |
| N | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| [| Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| d | lebt s the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| [| Yes | Other. Specify | |
| 4.6 | Citicards, CBNA | Last 4 digits of account number XXXX | \$14,038.00 |
| F | Nonpriority Creditor's Name P.O. Box 6241 | When was the debt incurred? | |
| | Sioux Falls, SD 57117-6241 | As of the date were file the claim in Ot. 1. II.II. | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | ☐ Contingent | |
| _ | <u></u> | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | ☐ Student loans | |
| | lebt s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| _ | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | <u> </u> | |
| | Yes | Other. Specify | |
| | Discover Cards Ionpriority Creditor's Name | Last 4 digits of account number XXXX | \$4,563.00 |
| F | P.O. Box 15316 Wilmington, DE 19850 | When was the debt incurred? | |
| <u> </u> | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | Vho incurred the debt? Check one. | | |
| [| Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| _ | ☐ At least one of the debtors and another ☐ Check if this claim is for a community | ☐ Student loans | |
| | icheck if this claim is for a community | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| ls | s the claim subject to offset? | report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| [| ☐Yes | Other. Specify | |

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| | or 1 John Wesley Myers Or 2 Gari Ann Hanlon-Myers | Case number (if know) | |
|-----|---|---|------------|
| 4.8 | GCS Federal Credit Union Nonpriority Creditor's Name | Last 4 digits of account number XXXX | \$214.00 |
| | 3970 Maryville Road Granite City, IL 62040 | When was the debt incurred? | |
| | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| 4.9 | Legatus Emerg Svcs. S. IL Nonpriority Creditor's Name | Last 4 digits of account number | \$205.00 |
| | P.O. Box 790126 Dept. 30535 Saint Louis, MO 63179-0126 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.1 | Synchrony Bank/Care Credit | Last 4 digits of account number XXXX | \$3,881.00 |
| | Nonpriority Creditor's Name P.O. Box 965036 | When was the debt incurred? | |
| | Orlando, FL 32896-5036 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | 7.6 of the date you me, the stall let offeet all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | | |
| | | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |

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| | or 1 John Wesley Myers or 2 Gari Ann Hanlon-Myers | Case number (if know) | |
|----------|---|--|------------|
| 4.1 1 | Synchrony Bank/Lowe's | Last 4 digits of account number XXXX | \$4,058.00 |
| | Nonpriority Creditor's Name P.O. Box 965036 Orlando, FL 32896-5036 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| 4.1 | Synchrony Bank/Walmart Nonpriority Creditor's Name | Last 4 digits of account number XXXX | \$2,754.00 |
| | P.O. Box 965036 Orlando, FL 32896-5036 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| 4.1 | Wells Fargo Financial | Last 4 digits of account number XXXX | \$1,112.00 |
| | Nonpriority Creditor's Name CSCL Team, MAC N8235-04M | When was the debt incurred? | |
| | P.O. Box 14517 | | |
| | Des Moines, IA 50306 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | The of the date year me, the stannie. One of an arat appry | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Debtor 1 | John Wesley Myers | | |
|----------|-----------------------|-----------------------|--|
| Debtor 2 | Gari Ann Hanlon-Myers | Case number (if know) | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|--------------|-----|---|-----|----|-------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| claims | 01 | T | 01 | _ | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 46,565.22 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 46,565.22 |

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| Fill in this infor | mation to identify your | case: | | | |
|---|-------------------------|-------------------|-------------|---|--------------------------------|
| Debtor 1 | John Wesley Mye | ers | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | SOUTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | _ | eck if this is an ended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with Name, Number | whom you have th , Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | <u> </u> | | 0.0.0 | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.4 | J, | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | | | 0.0.0 | 0000 | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |

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| Fill in this i | nformation to identify your | case: | | | |
|-----------------------------------|--|---|--|--|-----|
| Debtor 1 | John Wesley Myo | Middle Name | Last Name | | |
| Debtor 2 | Gari Ann Hanlon | | Last Name | | |
| (Spouse if, filing |) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | SOUTHERN DISTR | ICT OF ILLINOIS | | |
| Case number | er | | | ☐ Check if this is an amended filing | |
| Official | Form 106H | | | | |
| | ıle H: Your Cod | ebtors | | 12/15 | |
| people are fi fill it out, and | iling together, both are equ | ally responsible for s boxes on the left. Att | upplying correct information. ach the Additional Page to th | omplete and accurate as possible. If two married If more space is needed, copy the Additional Pag is page. On the top of any Additional Pages, write | ∍, |
| 1. Do yo | ou have any codebtors? (If | you are filing a joint ca | se, do not list either spouse as | a codebtor. | |
| ■ No | | | | | |
| ■ No □ Yes | | | | | |
| Arizona | | , Nevada, New Mexico, | Puerto Rico, Texas, Washingto | Community property states and territories include on, and Wisconsin.) | |
| in line 2 | 2 again as a codebtor only i 06D), Schedule E/F (Officia | f that person is a gua | rantor or cosigner. Make sure | our spouse is filing with you. List the person show you have listed the creditor on Schedule D (Offic . Use Schedule D, Schedule E/F, or Schedule G to | ial |
| | olumn 1: Your codebtor ame, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the deb Check all schedules that apply: | t |
| 3.1 | | | | ☐ Schedule D, line | |
| Na Na | ame | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| Ni Ci | umber Street ity | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | _ |
| | ame | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | umber Street ity | State | ZIP Code | | |
| | | | | | |

| Fill in this information | to identify your case: | |
|--|---|---|
| Debtor 1 | John Wesley Myers | |
| Debtor 2 Gari Ann Hanlon-Myers (Spouse, if filing) | | |
| United States Bankru | ptcy Court for the: SOUTHERN DISTRICT OF ILLINOIS | |
| Case number (If known) | | Check if this is: An amended filing A supplement showing postpetition chapter |
| Official Forn | n 106I | 13 income as of the following date: MM / DD/ YYYY |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. If you have more than one job, Employed Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Steel worker Waitress Include part-time, seasonal, or **Employer's name** U.S. Steel **Fiona's Family Restaurant** self-employed work. **Employer's address** Occupation may include student 1951 State Street 595 East Edwardsville Road or homemaker, if it applies. Granite City, IL 62040 Wood River, IL 62095 How long employed there? 17 years 3 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 1.284.47 312.29 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 1,284.47 \$ 312.29

Official Form 106I Schedule I: Your Income page 1

| | tor 1 tor 2 | John Wesley Myers Gari Ann Hanlon-Myers | - | Case | number (if known) | | | |
|-----|---|---|--------------------|-------------------|----------------------|------------------|----------------------|----------|
| | | | | | Debtor 1 | | btor 2 or | |
| | Cop | y line 4 here | 4. | \$_ | 1,284.47 | \$ | 312.29 | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 242.45 | \$ | 62.46 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$_ | 0.00 | \$ | 0.00 | |
| | 5e. | Insurance | 5e. | \$_ | 0.00 | \$ | 0.00 | |
| | 5f. | Domestic support obligations | 5f. | \$_ | 0.00 | \$ | 0.00 | |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | \$ | 0.00 | |
| | 5h. | Other deductions. Specify: | 5h.+ | \$_ | 0.00 | + \$ | 0.00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 242.45 | \$ | 62.46 | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 1,042.02 | \$ | 249.83 | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$- | 0.00 | \$ | 0.00 | |
| | 8c. 8d. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation | 8c. 8d. | \$_ \$_ | 0.00 | \$ | 0.00 0.00 | |
| | 8e. | Social Security | 8e. | \$_ | 1,189.00 | \$ | 0.00 | |
| | 8f. 8g. 8h. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: | 8f. 8g. 8h.+ | \$_ \$_ \$_ | 0.00 0.00 0.00 | \$ \$ + \$ | 0.00 0.00 0.00 | |
| | 0 | | | | 0.00 | | 0.00 | 1 |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,189.00 | \$ | 0.00 | |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. \$ | | 2,231.02 + \$ | 249 | .83 = \$ | 2,480.85 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | , | | | , |
| 11. | 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaies | | | | | 12. \$ | 2,480.85 |
| 13. | Do : | ou expect an increase or decrease within the year after you file this form | ? | | | | Combine monthly | |
| | | Yes. Explain: | | | | | | |

| Fill | in this informa | ation to identify yo | our case: | | | | | | | | |
|------------|--|--|--|---|--|-----------------|---|-------------------------------|--|--|--|
| Deb | otor 1 | John Wesley | y Myers | | | | k if this is: An amended filing | | | | |
| | ebtor 2 Gari Ann Hanlon-Myers Spouse, if filing) | | | | | | A supplement showing postpeti 13 expenses as of the following | | | | |
| Unit | ed States Bankr | ruptcy Court for the | : SOUTH | IERN DISTRICT OF ILLIN | OIS | ī | MM / DD / YYYY | | | | |
| 1 | e number nown) | | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | | | |
| So | chedule | J: Your | Exper | nses | | | | 12/15 | | | |
| Be info | as complete ormation. If mathematic moder (if know | and accurate as nore space is ne n). Answer ever | s possible eded, atta ry questio | . If two married people ar | | | | | | | |
| Par | | ribe Your House | hold | | | | | | | | |
| 1. | Is this a joir ☐ No. Go to | o line 2. | in a sanar | ate household? | | | | | | | |
| | _ | | п а зерап | ate nousenoiu: | | | | | | | |
| | ■ N □ Y | | st file Offici | al Form 106J-2, <i>Expense</i> s | for Separate House | ehold of Debt | or 2. | | | | |
| 2. | Do you have | e dependents? | □ No | | | | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? | | | |
| | Do not state | the | | | | | | □ No | | | |
| | dependents | names. | | | Daughter | | 10 | Yes | | | |
| | | | | | | | | □ No □ Yes | | | |
| | | | | | | | | ☐ Yes | | | |
| | | | | | | | | ☐ Yes | | | |
| | | | | | | | | □ No | | | |
| | | | | | | | | ☐ Yes | | | |
| 3. | expenses o | penses include of people other to d your depende | han 👝 | No Yes | | | | | | | |
| exp | imate your ex | | our bankr | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | | | | |
| the | | h assistance an | | government assistance i cluded it on <i>Schedule I:</i> Y | | | Your exp | enses | | | |
| 4. | | or home owners | | ses for your residence. In | nclude first mortgag | e 4. \$ | | 840.00 | | | |
| | If not include | ded in line 4: | | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 | | | |
| | | erty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 | | | |
| | | | | ipkeep expenses | | 4c. \$ | | 100.00 | | | |
| 5. | | owner's associat | | dominium dues our residence, such as ho | me equity loans | 4d. \$ 5. \$ | | 0.00 | | | |
| J. | Additional | norigage payill | cinco ioi yo | our residence, such as 110 | ino equity idans | υ. φ | | 0.00 | | | |

| | tor 1 | | esley Myers | | | | | |
|-----|---------|---|---|-----------------|---------------------------------------|----------|--|--|
| Deb | tor 2 | Gari Anr | n Hanlon-Myers | Case num | ber (if known) | | | |
| _ | | | | | | | | |
| 6. | Utiliti | | . heat matural man | 0- | ф | 000.00 | | |
| | 6a. | - | r, heat, natural gas | 6a. | · - | 200.00 | | |
| | 6b. | | wer, garbage collection | 6b. | · | 65.00 | | |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | · | 190.00 | | |
| _ | 6d. | Other. Spe | | 6d. | | 0.00 | | |
| 7. | | | sekeeping supplies | 7. | \$ | 500.00 | | |
| 8. | - | | children's education costs | 8. | \$ | 25.00 | | |
| 9. | | • | dry, and dry cleaning | 9. | \$ | 100.00 | | |
| | | • | products and services | 10. | · | 50.00 | | |
| 11. | | | ental expenses | 11. | \$ | 250.00 | | |
| 12. | | | . Include gas, maintenance, bus or train fare. car payments. | 12. | \$ | 0.00 | | |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 | | |
| 14. | Char | itable cont | tributions and religious donations | 14. | \$ | 0.00 | | |
| 15. | Insur | rance. | | | | | | |
| | | | nsurance deducted from your pay or included in lines 4 or 20. | | | | | |
| | | Life insura | | 15a. | \$ | 5.00 | | |
| | | Health ins | | 15b. | \$ | 0.00 | | |
| | 15c. | Vehicle in | surance | 15c. | \$ | 114.00 | | |
| | 15d. | Other insu | urance. Specify: | 15d. | \$ | 0.00 | | |
| 16. | | | nclude taxes deducted from your pay or included in lines 4 or 20. | | | | | |
| | Spec | | | 16. | \$ | 0.00 | | |
| 17. | | | ease payments: | 47- | Φ. | 40= 00 | | |
| | | . , | nents for Vehicle 1 | 17a. | · | 485.00 | | |
| | | | nents for Vehicle 2 | 17b. | · | 165.00 | | |
| | | Other. Spe | | 17c. | · | 0.00 | | |
| | | Other. Spe | · | 17d. | \$ | 0.00 | | |
| 18. | | | of alimony, maintenance, and support that you did not report | | \$ | 0.00 | | |
| 10 | | | your pay on line 5, Schedule I, Your Income (Official Form 106 s you make to support others who do not live with you. | oi). 10. | \$ | 0.00 | | |
| 10. | Spec | | 3 you make to support others who do not live with you. | 19. | Ψ | 0.00 | | |
| 20 | | | perty expenses not included in lines 4 or 5 of this form or on S | | our Income | | | |
| 20. | | | s on other property | 20a. | | 0.00 | | |
| | | Real estat | | 20b. | · . | 0.00 | | |
| | | | homeowner's, or renter's insurance | 20c. | · · · · · · · · · · · · · · · · · · · | 0.00 | | |
| | | | nce, repair, and upkeep expenses | 20d. | · · · · · · · · · · · · · · · · · · · | 0.00 | | |
| | | | ner's association or condominium dues | 20e. | · | 0.00 | | |
| 21 | | r: Specify: | | | +\$ | 0.00 | | |
| ۷., | Othic | i. Opcony. | | | ΙΨ. | 0.00 | | |
| 22. | | - | monthly expenses | | | | | |
| | | | through 21. | | \$ | 3,089.00 | | |
| | 22b. | Copy line 2 | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J | -2 | \$ | | | |
| | 22c. / | Add line 22 | a and 22b. The result is your monthly expenses. | | \$ | 3,089.00 | | |
| 23. | Calcı | ulate your | monthly net income. | | L | | | |
| | | | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,480.85 | | |
| | | | r monthly expenses from line 22c above. | 23b. | -\$ | 3,089.00 | | |
| | | 1,7,7.5 | • | | | | | |
| | 23c. | | your monthly expenses from your monthly income. | 220 | ¢ | -608.15 | | |
| | | The result | t is your monthly net income. | 23c. | \$ | -000.13 | | |
| 24 | Da | | on increase or decrease in your eveness within the year often | u van fila this | · farm? | | | |
| ∠4. | | Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a | | | | | | |
| | | nodification to the terms of your mortgage? | | | | | | |
| | ■ No | | | | | | | |
| | □ Ye | | Explain here: | | | | | |
| | | · · · | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | | | | |

| Fill in this inform | mation to identify your | case: | | | |
|---------------------|--|--------------------------|---------------------------------|------------------------------|--------------------|
| Debtor 1 | John Wesley Mye | are | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Gari Ann Hanlon- | Myers | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | inkruptcy Court for the: | SOUTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | ☐ Chec | k if this is an |
| | | | | amer | nded filing |
| Official Forn | | | Daletania Osta | alaala a | |
| Declarat | ion About a | in Individual | Debtor's Schee | dules | 12/15 |
| , | 8 U.S.C. §§ 152, 1341, 1 n Below | 515, and 5571. | | | |
| Did you pa | y or agree to pay some | one who is NOT an attor | ney to help you fill out bankru | ptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | Name of person | | | Attach Bankruptcy Petition F | |
| | | | | Declaration, and Signature (| Official Form 119) |
| | lty of perjury, I declare e true and correct. | that I have read the sum | mary and schedules filed with | this declaration and | |
| X /s/ Joh | n Wesley Myers | | X /s/ Gari Ann Har | nlon-Myers | |
| | Vesley Myers | | Gari Ann Hanlor | | |
| Signatu | re of Debtor 1 | | Signature of Debtor | r 2 | |
| Date / | August 31, 2016 | | Date August 31 | 1, 2016 | |

| Fill | in this inforn | nation to identify you | r case: | | | | | | |
|--------------------|---|---|--|---|---|---|--|--|--|
| | otor 1 | John Wesley My | | | | | | | |
| | | First Name | Middle Name | Last Name | | | | | |
| | otor 2 | Gari Ann Hanlor First Name | n-Myers Middle Name | Loot Nome | | | | | |
| ` ` | use if, filing) | | | Last Name | | | | | |
| Unit | ted States Bai | nkruptcy Court for the: | SOUTHERN DISTRICT C | OF ILLINOIS | | | | | |
| Cas (if kn | se number | | | | _ | Check if this is an mended filing | | | |
| Sta Be a | s complete a | of Financial | | are filing together, both are | equally responsible for sup | | | | |
| | | ore space is needed, | | this form. On the top of any | y additional pages, write you | ır name and case | | | |
| Par | t 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | | | | |
| 1. | What is you | r current marital statu | ıs? | | | | | | |
| | ■ Married□ Not mar | ried | | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | |
| | ■ No □ Yes. Lis | No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | |
| 3. state | | | | | ity property state or territory ico, Texas, Washington and W | | | | |
| | ■ No □ Yes. Ma | ike sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | | | | |
| Par | Explai | n the Sources of You | r Income | | | | | | |
| 4. | Fill in the total | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? | | | |
| | □ No | | | | | | | | |
| | Yes. Fill | in the details. | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$14,593.04 | ■ Wages, commissions, bonuses, tips | \$3,983.71 | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | |

Official Form 107

| | nn wesiey myers iri Ann Hanlon-Myer | s | Cas | e number (if known) | | | |
|---|--|---|---|--|---|--|--|
| | | Debtor 1 | | Debtor 2 | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| For last calen (January 1 to | dar year: December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$73,218.78 | ■ Wages, commissions bonuses, tips | \$11,027.59 | | |
| | | ☐ Operating a business | | ☐ Operating a business | 3 | | |
| | dar year before that: December 31, 2014) | ■ Wages, commissions, bonuses, tips | \$79,620.00 | ■ Wages, commissions bonuses, tips | \$12,557.00 | | |
| | | ☐ Operating a business | | ☐ Operating a business | 3 | | |
| □ No | Fill in the details. | come from each source separa | nery. Do not include income t | nat you noted III III1e 4. | | | |
| | | Debtor 1 | | Debtor 2 | | | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) | | |
| | 1 of current year unti iled for bankruptcy: | ^I Unemployment | \$7,250.00 | Unemployment | \$956.0 | | |
| For last calen (January 1 to | dar year: December 31, 2015) | | \$0.00 | Unemployment | \$4,541.0 | | |
| | Debtor 1's or Debtor | u Made Before You Filed for 2's debts primarily consume Debtor 2 has primarily cons | r debts? | s are defined in 11 U.S.C. 8 | \$ 101(8) as "incurred by a | | |
| No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred individual primarily for a personal, family, or household purpose." | | | | | | | |
| | _ ` ' | 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? Go to line 7. | | | | | |
| | Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | |
| | | nt on 4/01/19 and every 3 year | | or after the date of adjustm | nent. | | |
| Yes. | Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | |
| | ■ No. Go to line | 7. | | | | | |
| | include pa | each creditor to whom you pa lyments for domestic support or or this bankruptcy case. | | | | | |
| | s Name and Address | Dates of payme | ent Total amount | Amount you Was th | nis payment for | | |

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| Debt Debt | | John Wesley Myers Gari Ann Hanlon-Myers | | Cas | e number (if known) | | |
|---------------------------|--|---|---|--|--|----------------------------------|--|
| <i>Inside</i> of whice | | n 1 year before you filed for bankrupt ers include your relatives; any general pa ich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny. | artners; relatives of any gen a control, or owner of 20% o | eral partners; partner r more of their voting | erships of which yo g securities; and a | ou are a genera ny managing a | I partner; corporations gent, including one for |
| ı | • • | No | | | | | |
| [| _ | Yes. List all payments to an insider. | | | | | |
| | Insid | ler's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| i | nside | n 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos | | ments or transfer a | any property on a | ccount of a de | ebt that benefited an |
| ı | 1 | No | | | | | |
| [| ן ר | Yes. List all payments to an insider | | | | | |
| | Insid | ler's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include credi | this payment tor's name |
| Part | 4: | Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| L r | ist al nodifi | n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details. | | | | | |
| | | e title e number | Nature of the case | Court or agency | | Status of the | e case |
| 10. \ | | | | erty repossessed, f | oreclosed, garnis | shed, attached | , seized, or levied? |
|] [| No. Go to line 11.Yes. Fill in the information below. | | | | | | |
| | Cred | litor Name and Address | Describe the Property | | | | Value of the |
| | | | Explain what happened | I | | | property |
| a I | accou ■ N | n 90 days before you filed for bankru unts or refuse to make a payment bed No | | uding a bank or fir | nancial institutior | n, set off any a | mounts from your |
| - | | Yes. Fill in the details. | | | | | |
| | Cred | litor Name and Address | Describe the action the | creditor took | Date taker | action was | Amount |
| | | n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a | | erty in the possess | ion of an assigne | e for the bene | fit of creditors, a |
| I [| _ | No Yes | | | | | |
| Part | 5: | List Certain Gifts and Contributions | | | | | |
| 13. \ | | n 2 years before you filed for bankrup No | otcy, did you give any gifts | s with a total value | of more than \$60 | 0 per person? | • |
| [| _ | Yes. Fill in the details for each gift. | | | | | |
| | | s with a total value of more than \$600 person | Describe the gifts | | Date: the g | s you gave ifts | Value |
| | | on to Whom You Gave the Gift and ress: | | | | | |

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| | tor 1 John Wesley Myers tor 2 Gari Ann Hanlon-Myers | | (| Case number (| if known) | |
|-----|--|------------------------------|--|-----------------|-----------------------------------|--------------------------|
| | Carry marianen myere | | | (| | |
| 14. | Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or or | | | ns with a total | value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | otal | Describe what you contributed | | Dates you contributed | Value |
| Par | List Certain Losses | | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? | ptcy or | since you filed for bankruptcy, did y | you lose anytl | ning because of thef | t, fire, other disaster, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Describe the property you lost and how the loss occurred | Include | the amount that insurance has paid. Loc claims on line 33 of Schedule A/B: | _ist pending | Date of your loss | Value of property lost |
| Par | 17: List Certain Payments or Transfers | 5 | | | | |
| 16. | Within 1 year before you filed for bankru consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition process. No Yes, Fill in the details. | oreparin | g a bankruptcy petition? | | | rty to anyone you |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | | Description and value of any property transferred | | Date payment or transfer was made | Amount of payment |
| | David A. Virgin 24 North Lincoln Cottage Hills, IL 62018 davidvirgin@att.net | | | | 7/28/16, 8/4/16 | \$1,000.00 |
| 17. | Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that | litors or | to make payments to your creditor | | r transfer any prope | rty to anyone who |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount of payment |
| | Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers that you have alr | i r busin e made a | ess or financial affairs? is security (such as the granting of a s | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | | iny property or received or debts | Date transfer was made |
| | Person's relationship to you | | | F 3 111 OA | | |

| | otor 1 otor 2 | John Wesley Myers Gari Ann Hanlon-Myers | | | | Case num | ber (if known) | |
|-----|---|--|--------|---|-----------------|-----------------------|---|--|
| 19. | benef | n 10 years before you filed for bankrup ficiary? (These are often called asset-pro No Yes. Fill in the details. | | | y property to a | a self-settled | d trust or similar device | of which you are a |
| | Nam | e of trust | | Description and va | alue of the pro | perty trans | ferred | Date Transfer was made |
| Par | t 8: | List of Certain Financial Accounts, In | strum | nents, Safe Deposit | Boxes, and S | torage Unit | s | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for yo sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | , |
| | Addı | | | ast 4 digits of Type of accounce count number instrument | | ount or | Date account was closed, sold, moved, or transferred | Last balanc before closing o transfe |
| 21. | cash, | ou now have, or did you have within 1 y , or other valuables? No Yes. Fill in the details. | year I | before you filed for | bankruptcy, a | ny safe dep | oosit box or other deposi | tory for securities, |
| | | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe | the contents | Do you still have it? |
| 22. | = 1 | you stored property in a storage unit on the storage unit of the s | or pla | ace other than your | home within ' | l year befor | e you filed for bankrupto | y? |
| | | nme of Storage Facility Idress (Number, Street, City, State and ZIP Code) | | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | Do you still have it? |
| Par | t 9: | Identify Property You Hold or Control | for S | Someone Else | | | | |

- 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.
 - No

☐ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 **John Wesley Myers** Debtor 2 **Gari Ann Hanlon-Myers** Case number (if known) 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

No

Business Name Address

Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

Name Address

(Number, Street, City, State and ZIP Code)

Date Issued

☐ An officer, director, or managing executive of a corporation

No. None of the above applies. Go to Part 12.

☐ An owner of at least 5% of the voting or equity securities of a corporation

Yes. Check all that apply above and fill in the details below for each business.

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| Debtor 1 | John Wesley My | ers | | |
|------------|------------------------|----------------------------------|---------|---|
| Debtor 2 | Gari Ann Hanlor | n-Myers | | Case number (if known) |
| | _ | | | |
| Part 12: | Sign Below | | | |
| I have rea | nd the answers on th | is Statement of Financial Affa | airs ar | nd any attachments, and I declare under penalty of perjury that the answers |
| | | | | c, concealing property, or obtaining money or property by fraud in connection |
| with a bar | nkruptcy case can re | sult in fines up to \$250,000, o | or imp | prisonment for up to 20 years, or both. |
| 18 U.S.C. | §§ 152, 1341, 1519, a | and 3571. | | |
| /s/ John | n Wesley Myers | J: | s/ Ga | ari Ann Hanlon-Myers |
| | eslev Myers | | | Ann Hanlon-Myers |
| | e of Debtor 1 | | | ture of Debtor 2 |
| Date A | august 31, 2016 | | Date | August 31, 2016 |
| Did you a | ttach additional page | es to Your Statement of Finar | ncial A | Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No | | | | |
| ☐ Yes | | | | |
| | | | | |
| Did you p | oay or agree to pay so | omeone who is not an attorne | y to h | help you fill out bankruptcy forms? |
| No | | | | |
| ☐ Yes. N | ame of Person | . Attach the Bankruptcy Petition | n Prep | parer's Notice, Declaration, and Signature (Official Form 119). |

| Fill in this infor | mation to identify your case: | | |
|---|--|--|---|
| Debtor 1 | John Wesley Myers | | |
| | First Name Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | Gari Ann Hanlon-Myers First Name Middle Name | Last Name | |
| , , , , , | | STRICT OF ILLINOIS | |
| | | | |
| Case number (if known) | | | ☐ Check if this is an amended filing |
| Official Fo | | viduals Filing Under Chapter | · 7 12/15 |
| | lividual filing under chapter 7, you must f | ill out this form if: | |
| you have lease You must file the whiches on the | ever is earlier, unless the court extends to form | not expired. If you file your bankruptcy petition or by the date set to the time for cause. You must also send copies to the co | creditors and lessors you list |
| Be as complete | | is needed, attach a separate sheet to this form. On th | e top of any additional pages, |
| 1. For any credit | | D: Creditors Who Have Claims Secured by Property (| Official Form 106D), fill in the |
| information b Identify the cr | elow. reditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's (| GCS Federal Credit Union | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| | | Retain the property and redeem to a | Yes |
| Description of property securing debt | 2012 Ford F150 51,000 miles | Reaffirmation Agreement. □ Retain the property and [explain]: | |
| Creditor's § | Scott Air Force Base Credit Union | ☐ Surrender the property. ☐ Retain the property and redeem it. | ■ No |
| Description of | f 2007 Hyundai Sonato 155,000 | Retain the property and enter into a | ☐ Yes |
| property securing debt | miles | Reaffirmation Agreement. □ Retain the property and [explain]: | |
| Creditor's V | Wells Fargo | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of | f 152 Grand Avenue Wood River, IL 62095 Madison County One story, brick, 3 bedrooms, 2 | Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| property securing debt: 2100 sq. ft., 150x62 sq. ft. Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet en You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: Description of leased | |
|---|----|
| For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet en You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: | |
| Lessor's name: | |
| — 110 | |
| Property: | |
| Lessor's name: Description of leased | |
| Property: Lessor's name: Description of leased | |
| Property: | |
| Lessor's name: Description of leased Property: No Yes | |
| Lessor's name: Description of leased Property: Property: | |
| Lessor's name: Description of leased | |
| Property: Lessor's name: No | |
| Description of leased Property: Yes | |
| Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any person property that is subject to an unexpired lease. | al |
| X /s/ John Wesley Myers X /s/ Gari Ann Hanlon-Myers John Wesley Myers Gari Ann Hanlon-Myers | |
| Signature of Debtor 1 Signature of Debtor 2 Date August 31 2016 Date August 31 2016 | |

| Fill is | n this information to identify your case: | | 01 | | | | | |
|------------------------------------|---|--|---|--|---|---|---|---|
| | | | | eck on 2A-1Sı | | irected | n this form and i | n Form |
| Debt | tor 1 John Wesley Myers | | | | | | | |
| Debt | tor 2 Gari Ann Hanlon-Myers | | | ■ 1. T | here is no pres | umption | of abuse | |
| | • | t of Illinois | | ⊐ 2. T | he calculation t | o deterr | nine if a presump | otion of abuse |
| Unite | ed States Bankruptcy Court for the: Southern Distric | t of IIIInois | | | | | der <i>Chapter 7 M</i> | eans Test |
| l . | e number | | | _ | Calculation (Off | | , | |
| (if kno | wn) | | | | | | ot apply now beca but it could app | |
| | | | 1 | □ Ch | eck if this is a | n amer | nded filing | |
| Off | icial Form 122A - 1 | | | | | | | |
| | apter 7 Statement of Your Cu | ırrent Mor | nthly Inc | om | e | | | 12/1 |
| attach case i qualif Part | What is your marital and filing status? Check one Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill Married and your spouse is NOT filing with you Living in the same household and are not le Living separately or are legally separated. File | owhich the addition on a presumption mption from Presumonly. out both Columns J. You and your s gally separated. If out Column A, lii | A and B, lines spouse are: Fill out both Colnes 2-11; do no | pplies se you Under 2-11. umns of fill or | On the top of aido not have pring \$707(b)(2) (Office) A and B, lines 2 at Column B. By | y additi narily co cial Form 2-11. | onal pages, write nsumer debts or la 122A-1Supp) with | your name and because of h this form. |
| | penalty of perjury that you and your spouse are living apart for reasons that do not include eva- | | | | | | at you and your s | pouse are |
| 10 the | II in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6 e 6 months, add the income for all 6 months and divide the to bouses own the same rental property, put the income from that | -month period would tal by 6. Fill in the res | be March 1 throusult. Do not include | igh Aug le any i | gust 31. If the amount m | ount of your | our monthly income once. For example | varied during , if both |
| | | | | Colur Debte | | | on B or 2 or illing spouse | |
| 2. | Your gross wages, salary, tips, bonuses, overtime payroll deductions). | e, and commissio | ons (before all | \$ | 1,284.47 | \$ | 663.96 | |
| 3. | Alimony and maintenance payments. Do not include Column B is filled in. | de payments from | a spouse if | \$ | 0.00 | \$ | 0.00 | |
| 4. | All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3. | rt. Include regular old, your depender spouse only if Col | contributions nts, parents, | \$ | 0.00 | \$ | 0.00 | |
| 5. | Net income from operating a business, profession | • | 4an 4 | | | | | |
| | One are managing to the form all the description | \$ 0.00 | tor 1 | | | | | |
| | Gross receipts (before all deductions) | \$ 0.00 -\$ 0.00 | | | | | | |
| | Ordinary and necessary operating expenses | | Copy here -> | \$ | 0.00 | \$ | 0.00 | |
| 6 | Net monthly income from a business, profession, or f. Net income from rental and other real property | анн ф | 2007 11010 7 | – | 0.00 | * | <u> </u> | |
| 6. | Net income from rental and other real property | Deb | tor 1 | | | | | |
| | Gross receipts (before all deductions) | \$ 0.00 | | | | | | |
| | Ordinary and necessary operating expenses | -\$ 0.00 | | | | | | |
| | Net monthly income from rental or other real property | 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 | |

Official Form 122A-1

0.00

\$

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

0.00

Gari Ann Hanlon-Myers Debtor 2 Case number (if known) Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 1,208.33 80.00 Unemployment 0.00 0.00 Total amounts from separate pages, if any. 0.00 \$ 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 2,492.80 \$ 743.96 \$ 3,236.76 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 3,236.76 Multiply by 12 (the number of months in a year) x 12 38,841.12 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 72,429.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sian Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ John Wesley Myers X /s/ Gari Ann Hanlon-Myers John Wesley Myers **Gari Ann Hanlon-Myers** Signature of Debtor 1 Signature of Debtor 2 Date August 31, 2016 Date August 31, 2016 MM / DD / YYYY MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

John Wesley Myers

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | ¢310 | total foo |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Illinois

| In | John We | | | | | | Case No. | | |
|-----|---------------------------------------|--|---|---|--|---|--------------|--------------------------|--------------------|
| | | | | | Debtor(s) | | Chapter | 7 | |
| | | | | | SATION OF A | | | ` , | |
| 1. | compensation j be rendered on | oaid to me behalf of | e within one year f the debtor(s) in o | before the filing contemplation of | b), I certify that I am the of the petition in bank or in connection with | ruptcy, or agreed the bankruptcy of | d to be paid | to me, for service lows: | |
| | | | | | | | | 1,000.00 | |
| | | | | | | | | 1,000.00 | |
| | Balance D | ue | | | | \$ | | 0.00 | |
| 2. | \$_335.00_ | of the fili | ing fee has been p | paid. | | | | | |
| 3. | The source of t | he compo | ensation paid to m | ne was: | | | | | |
| | ■ Debto | r [| Other (specify | y): | | | | | |
| 4. | The source of o | ompensa | ation to be paid to | me is: | | | | | |
| | Debto | r [| Other (specify | y): | | | | | |
| 5. | ■ I have not | agreed to | share the above- | disclosed compe | nsation with any other | person unless th | ey are meml | bers and associat | es of my law firm. |
| | | | | | ion with a person or pe es of the people sharin | | | | my law firm. A |
| 6. | In return for th | e above- | disclosed fee, I ha | ave agreed to ren | der legal service for al | aspects of the b | ankruptcy c | ase, including: | |
| | b. Preparation | and filin | g of any petition, e debtor at the me | schedules, stater | ing advice to the debto ment of affairs and pla s and confirmation hea | which may be | required; | - | bankruptcy; |
| 7. | Nego Motio repre | tiation on the constant of the | of or represent leopen to file C | ation of Debto Certificate(s) of or(s) in adversa | does not include the for(s) in respect to R f Debtor(s) Education ary proceedings or 's Office. | eaffirmation A on. Appeals fr | om ruling: | s of the bankru | uptcy court or |
| | | | | | CERTIFICATION | | | | |
| thi | I certify that the sankruptcy process | | ng is a complete s | statement of any | agreement or arrangen | nent for payment | to me for re | epresentation of t | the debtor(s) in |
| | August 31, 20 Date | 16 | | | Signature of David A. Vi 24 North Li Cottage Hi | rgin 03124996 Attorney rgin ncoln Is, IL 62018 70 Fax: 618-2 | | | |
| | | | | | Name of law | | | | |

United States Bankruptcy Court Southern District of Illinois

| In re | Gari Ann Hanlon-Myers | | Case No. | | | | | | | | |
|-------|--|---------------------------|-------------|---|--|--|--|--|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | | | | | |
| | | | | | | | | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | | | | | |
| | | | | | | | | | | | |
| | The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of my/our knowledge and that it corresponds to the creditors listed in my/our schedules. | | | | | | | | | | |
| Date: | August 31, 2016 | /s/ John Wesley Myers | | | | | | | | | |
| | | John Wesley Myers | | | | | | | | | |
| | | Signature of Debtor | | | | | | | | | |
| Date: | August 31, 2016 | /s/ Gari Ann Hanlon-Myers | | | | | | | | | |
| | | Gari Ann Hanlon-Myers | | | | | | | | | |
| | Signature of Debtor | | | | | | | | | | |

John Wesley Myers

Affordable Dentistry 50 North Center Street East Alton, IL 62024

Barclays Bank, Delaware P.O. Box 8803 Wilmington, DE 19899-8803

Calloway County Sheriff's Office 701 Olive Street Murray, KY 42071

Capital One P.O. Box 30253 Salt Lake City, UT 84130-0253

Capital One P.O. Box 30253 Salt Lake City, UT 84130-0253

Citicards, CBNA P.O. Box 6241 Sioux Falls, SD 57117-6241

Discover Cards P.O. Box 15316 Wilmington, DE 19850

GCS Federal Credit Union 3970 Maryville Road Granite City, IL 62040

GCS Federal Credit Union 3970 Maryville Road Granite City, IL 62040

Legatus Emerg Svcs. S. IL P.O. Box 790126 Dept. 30535 Saint Louis, MO 63179-0126

Scott Air Force Base Credit Union W.Winters & J Streets Scott Air Force Base, IL 62225 Synchrony Bank/Care Credit P.O. Box 965036 Orlando, FL 32896-5036

Synchrony Bank/Lowe's P.O. Box 965036 Orlando, FL 32896-5036

Synchrony Bank/Walmart P.O. Box 965036 Orlando, FL 32896-5036

Wells Fargo P.O. Box 14411 Des Moines, IA 50306-3411

Wells Fargo Financial CSCL Team, MAC N8235-04M P.O. Box 14517 Des Moines, IA 50306